



S/10/615,484

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Alan R. Fritzberg	Examiner:	Dameron L. Jones
Serial No.:	10/615,484	Group Art Unit:	1618
Filed:	July 08, 2003	Docket:	295.034US1
Title:	THERAPEUTIC AND DIAGNOSTIC COMPOUNDS, COMPOSITIONS, AND METHODS		

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the enclosed materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicant respectfully requests that this Supplemental Information Disclosure Statement be entered and the documents listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicant requests that a copy of the 1449 form, initialed as being considered by the Examiner, be returned to the Applicant with the next official communication.

Pursuant to 37 C.F.R. §1.97(c)(2), Applicants have authorized the fee of \$180.00 as set forth in 37 C.F.R. §1.17(p) to be charged to Deposit Account No. 19-0743. Please charge any additional fees or credit any overpayment to Deposit Account No. 19-0743.

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SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Serial No :10/615,484

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The Examiner is invited to contact the Applicant's Representative at the below-listed telephone number if there are any questions regarding this communication.

Pursuant to 37 C.F.R. 1.98(a)(2), Applicant believes that copies of cited U.S. Patents and Published Applications are no longer required to be provided to the Office. Notification of this change was provided in the United States Patent and Trademark Office OG Notices dated October 12, 2004. Thus, Applicant has not included copies of any US Patents or Published Applications cited with this submission. Should the Office require copies to be provided, Applicant respectfully requests that notice of such requirement be directed to Applicant's below-signed representative. Applicant acknowledges the requirement to submit copies of foreign patent documents and non-patent literature in accordance with 37 C.F.R. 1.98(a)(2).

Respectfully submitted,

ALAN R. FRITZBERG

By his Representatives,

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Date 8/3/05

By Warren D. Woessner
Warren D. Woessner
Reg. No. 30,440

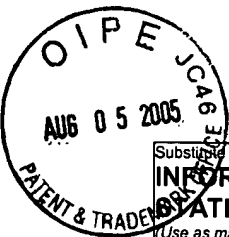
CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 3rd day of July, 2005.

Name

Dawn M. Poole

Signature

Dawn M. Poole



Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number	10/615,484
Filing Date	July 8, 2003
First Named Inventor	Fritzberg, Alan
Group Art Unit	1618
Examiner Name	Jones, Dameron

Sheet 1 of 1

Attorney Docket No: 295.034US1

US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate
	US-2005/0129667A1	06/16/2005	Fritzberg, A. R., et al.	01/24/2005

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T ²
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OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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EXAMINER**DATE CONSIDERED**

Substitute Disclosure Statement Form (PTO-1449)

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional) ² Applicant is to place a check mark here if English language Translation is attached